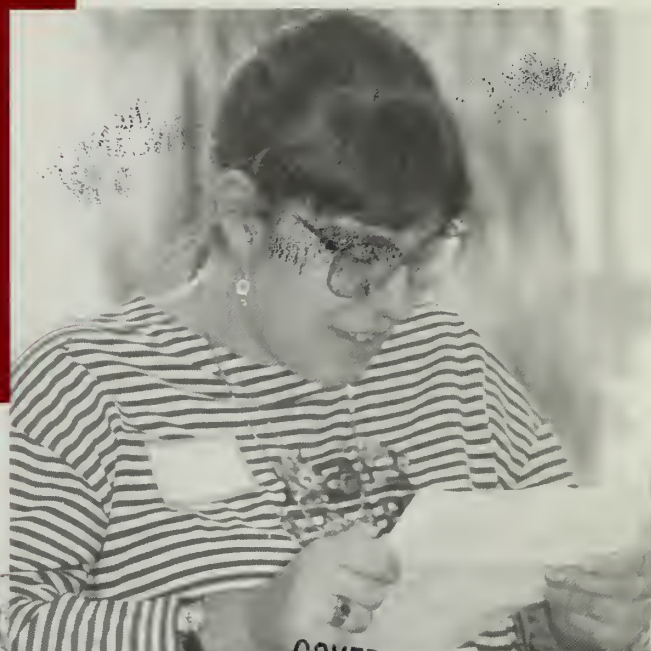


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in Partnership with Communities



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Annual Report

July 1, 1997 - June 30, 1998

Commonwealth of Massachusetts

Argeo Paul Cellucci
Governor

Jane Swift
Lieutenant Governor

William D. O'Leary, Secretary
Executive Office of Health and
Human Services

Gerald J. Morrissey, Jr., Commissioner
Department of Mental Retardation

The Department of Mental Retardation is an independent state agency within the Executive Office of Health and Human Services which provides a wide range of services and supports to Massachusetts' citizens with mental retardation.

Everyday, the DMR provides an array of support services to more than 27,000 people across the state. Their level of disability may require assistance in job placement, transportation, or residential services, or more intense levels of treatment, monitoring and care. The DMR provides these services through state-operated programs and by contracting with more than 310 private provider agencies and in partnership with families across the state.

The DMR strives to provide support services in safe and healthy environments and promotes the creation of opportunities for people with disabilities to become fully integrated participants in their communities. It promotes individual development, encourages family involvement, and emphasizes consumer and family involvement in the decision making process.

Cover Photos

Left photo: Andrea McCue and Mark Vonrompay from Milton on their way to the Milton High School Senior Prom

Center photo: Dawn Crayton, of Rockland (third from left), graduates from Weymouth High School Class of 1998

Right photo: Self advocate Jennifer Petruzzi, from Brimfield, at a Central Mass Regional meeting



Commissioner's Message

Guy Morrissey

There is a new look and feel to this year's DMR Annual Report. I felt it was important to move to an expanded format to let people know about the new spirit in DMR, our strengths, our activities, and the achievements of the people we support.

It has been a good year. I think that is a significant statement in light of the fact that a year ago there were so many uncertainties on the horizon. But with the help of families, staff, advocates, legislators, and communities we buckled down. We concentrated on the tasks at hand. We persevered and as a Department prevailed.

Together we accomplished many significant goals. The DMR continues to serve more people and families. We have expanded support services, offered families more options, and increased funding. We have added many refinements in our support system in the last year. We are working with and encouraging school systems throughout the state to be leaders in inclusion. We are keeping more families together, and providing more meaningful opportunities for people to live independently and become true citizens in their communities.

We are developing flexible, cost-effective supports that individuals and families want. We have developed new and innovative partnerships with cities and towns, community organizations, and businesses to increase access and acceptance of people with mental retardation. We brought in a new Central management team that has significant field experience. I stressed throughout the year that we are all one agency from the direct care staff in the Berkshires to the service coordinators on the Cape, to facility staff at Hogan to the fiscal staff in Central Office.

We instituted new protocols to ensure better communication. We strengthened critical incident reporting. We held meetings and visits in each region for area and facility staff, boards and families, and several meetings with self advocates - whose voice is essential. I believe that we have turned down the volume, dismantled the firewalls, and discovered new ways of working with all of our constituencies to take advantage of our common goal of trying to provide the best supports and services we can to Massachusetts citizens with mental retardation.

If we expect quality, if we care, then we must invest in our staff and give them the tools, the support and trust that they need to do their jobs well. Our staff are the ambassadors every day with individuals, families, providers, and communities. We have made peace with labor and we want to rebuild effective labor-management practices at the local and state level.

The 21st century offers a new stage upon which to look at complex challenges in brand new ways. New ways demand new energy and new vision. Our workers deserve such support; the people we serve deserve no less.

But despite new funding, new initiatives, and new programs, the job still remains fairly basic. People in need come to us for supports and we work with these individuals and families to meet them. Although it's not easy and can be very frustrating, it can also be very rewarding and fulfilling. We all play a part in offering hope, in turning a life around, and when the proper supports are in place, making dreams come true.

As DMR staff, we will continue to serve individuals and families with dignity, pride, respect and compassion. We will define who we are, what we do, and how we work with families and people with mental retardation across Massachusetts. The challenge is ours to accept and to meet.

This is the future we are moving towards. I firmly believe that if we work together, communicate with each other, support each other, and stay focused, we will build a Department that we can all be proud of as we move towards the next century. Thank you for making my first year a wonderful journey that has enabled us to connect our Department to our communities, our staff and the families and individuals we are proud to support.



Department of Mental Retardation

Annual Report

July 1, 1997 - June 30, 1998

A great sports team, cause, or organization succeeds when dedicated people recognize a common goal and work together to achieve that end. It takes leadership, talent, diversity, and follow through to produce outstanding results. The job becomes easier for all as each member of the team does their part, uses their knowledge and skills for the common good.

This goal of partnership and community is one the Massachusetts Department of Mental Retardation (DMR) strongly embraced during this last fiscal year (FY98). The DMR is so much more than the 7,500 employees, the seven facilities, the 29 regional and area offices, and the 1,500 small community residences across the state. It is the 27,169 individuals

with mental retardation the DMR supports. It is their loving families and guardians. It is the Cellucci Administration and the dedicated legislature. It is the 310 private

and the active membership of the Statewide Advisory Council, regional, area, and facility boards.

DMR even extends beyond people with the closest ties to the MR community to local governments, police, businesses, religious and civic organizations that are working to help people with disabilities feel welcome and at home in their communities.

All of these elements need to work together with common understanding to ensure that Massachusetts citizens with mental retardation can lead their lives to their maximum potential.

FY98 was a successful one for the DMR. It was a year that saw many new initiatives, increased state funding to support more individuals and families who

Major Accomplishments in FY98:

- \$13.65 million in new funding to meet the needs of individuals and families. These funds were for the Waiting List (5.75M), Family Support (2.5M), Turning 22 (4.4M), and pay increases for private provider staff.
- Coalition formed to bring increased funding to address the Waiting Lists in FY99 budget
- Commissioner forms panel of external experts to examine DMR Investigations
- Department of Education/DMR project continues that provides alternatives to residential schools and keeps families intact. Some 163 students participate in the project.
- Supported 1,239 more individuals than in FY97.
- Conducted an external management review of the agency

provider organizations. It is the growing number of self-advocates

more individuals and families who

FY98 Calendar Highlights

| July ▼ | ▼ | August | September ▼ |
|---|--|--|---|
| July 1 DMR receives renewal and expansion of Medicaid Home and Community Based waiver | July 7 DMR Investigations Panel formed | July 21 13.65M in New Funding in FY98 Budget | August 7 Secretary O'Leary addresses Urban Youth Collaborative Reception at State House |
| | | | September 15 New Central Office Management Team put in place |
| | | | September 15 Investigations Panel holds first public hearing in Southeast Region. Others held in four other regions in September and October. |

have been waiting for services, and a building of this trust, communication and partnerships between the many stake holders in the MR community.

It was a time the (DMR) continued down a path of change, achievement, innovation and development as this Annual Report documents. Still in the midst of this change, the important day-to-day work of the agency continued. DMR and provider staff continued the work they do 365 days a year, quietly and professionally providing quality supports to thousands of individuals and families across the state. These supports may be places to live, transportation, assistance in daily living, help on-the-job or preparing people for work,

respite, or intense levels of treatment, monitoring, or care.

Mental retardation is a chronic, lifelong disability. It is found in approximately 1.5 percent of all births worldwide. As society has progressed in its understanding of the condition, people with mental retardation have been able to lead full, satisfying lives as active and participating members of their home communities.

The DMR is about people, people with disabilities striving to reach their full potential. It is about professional staff supporting and working with these individuals and their families to develop individual-

ized services that help people live safely and independently.

The DMR is the second largest provider of services and supports to people with mental retardation. The largest provider, of course, is families and friends who care for their loved ones every day making sure they are safe, comfortable and leading full lives. A state agency is no substitute for the nurturing bond that occurs naturally in a loving supportive family.

The Department recognizes its role to support and work with individuals, families, advocates, providers, and community groups in partnership so that Massachusetts can remain a leader in the development of innovative and flexible supports that truly meet the needs and desires of the people we support.

It was not too many years ago that people with mental retardation and their families lived in isolation. The Department's Mission Statement has become the framework for the effort of thousands of DMR employees, family members, and communities to form a partnership to shatter the myths and misconceptions of the limitations of people with disabilities. Each day this partnership works together, never alone, to create "innovative and genuine opportunities for individuals with mental retardation to participate meaningfully in, and contribute to their communities as valued members."



Winners of the 1998 Partnership Awards at the Great Hall of the State House on March 25 with WBZ-TV anchor Jack Williams (far right).

FY98 Calendar Highlights

| October | | | | |
|---|--|---|--|---|
| September 25 Western Mass hosts inclusion awards for 30 educators | September 29 Commissioner addresses grandparents luncheon in Springfield | October 1 UMass/DMR awards \$165,000 on grant competition | October 9 Raquel Rodriguez wins Manuel Caballo Award. Commonwealth honors 32 DMR staff at Performance Recognition Dinner | October 21 Investigations Panel completes public hearings in Boston |

Administration

FY98 saw the first full year of Gerald J. Morrissey, Jr., as Commissioner. It was a year where partnerships with individuals, families, advocates, private providers, businesses, local communities and agencies were reinforced. Working with advocacy groups and families, one could sense a new spirit of trust, communication, and understanding between the various constituencies. There is strong evidence from the record of the year's achievements, the awards the DMR presented and achieved, that much progress has been made to foster these partnerships.

A new management team came to Central Office and created a new direction and spirit for the Department. The five Regional Directors became part of senior management which led to better communication and support to field operations.

In December and January Commissioner Morrissey traveled to all five regions. These visits were designed to provide recognition and appreciation to the legislators, advocates and family members who had worked tirelessly for the benefit of people with disabilities. The majority of these visits began with a morning thank-you breakfast where the Commissioner met with local legisla-

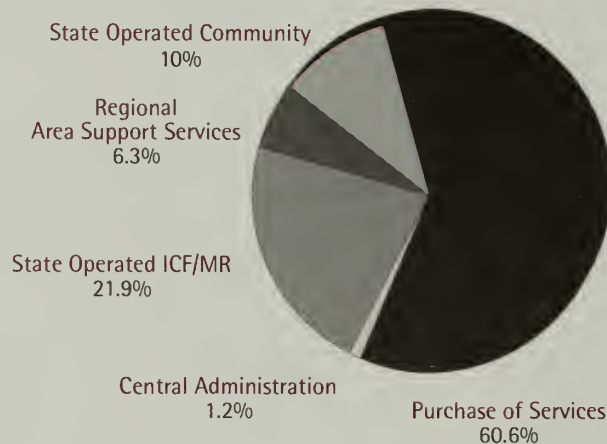
tors, board members, civic and business leaders. Commissioner Morrissey also discussed the Department's economic impact on the region. He also visited local service sites and met with editorial boards of daily newspapers.

On March 25, Argeo Paul Cellucci, Governor of the Commonwealth of Massachusetts, delivered the keynote address at DMR's Community Partnership Awards at the State House. More than 350 people attended the event

that honored 17 people and organizations across the state. Across the state, there were numerous local events, sponsored by the DMR, area offices and boards to recognize March as Mental Retardation/Developmental Disabilities month.

These activities helped forge a coalition of support that worked together with the Cellucci administration and the Legislature which led to significant funding increases in the FY99 budget. This budget

Distribution of Resources FY'98 Total Budget \$781.8M



FY98 Calendar Highlights

| November | | December | |
|----------|---|----------|--|
| ▼ | October 24 Central Region and Worcester Public Library open Resource Library for families who have children with special needs. | ▼ | November 1 DMR issues Updated Waiting List Report to the House and Senate Committees on Ways and Means |
| | | | November 13 250 attend first conference for individuals with mental retardation and deafness, "A Partnership for Change: Enhancing Supports for Deaf People with Disabilities" |
| | | | December 1 DMR launches new website on the Internet at www.dmr.state.ma.us |

allocated \$811.55 million. This was a very favorable budget that included expansion funding of \$18.5 million; \$10 million for the Waiting List and \$6.95 million for Turning 22 expansion funding to serve all the individuals who graduate in FY 99.

In April, 600 DMR staff, self advocates and family members attended the 1998 DMR Annual Conference at the Sturbridge Host Hotel and Conference Center in Sturbridge, MA. The conference focused on, "The Lifelong Journey to Connection and Belonging."

Mel King, former state representative and Boston mayoral candidate, served as the keynote speaker. In his remarks King said, "What we do to benefit access for one group leads to better access and participation for other groups." King is currently a professor emeritus in Urban Studies and Planning at the Massachusetts Institute of Technology. He is involved with a number of innovative community projects in the city of Boston.

"I firmly believe that if we work together, communicate with each other, support each other, and stay focused we will build a Department that we can all be proud of as we move to the 21st Century," Commissioner Morrissey said in his remarks.

Throughout the day there were a series of workshops that examined topics such as supporting loving



More than 200 students, participating in DMR's Urban Youth Collaborative Program, visited the Massachusetts State House on August 7, 1997.

relationships, self-advocacy, developing partnerships, adolescence, faith, and developing community connections.

Investigations Panel

At the beginning of the fiscal year, a panel of external experts began an examination of DMR Investigations and how it handles abuse investigation. Nine distinguished individuals from the judiciary, law enforcement, government and family members served on the panel. It was chaired by Elizabeth D. Scheibel, Northwestern District Attorney. In the spring, this panel issued a report on their findings that among other items called for local police and DA's to investigate serious felonies that are committed against people with mental retardation.

The Investigations Unit together

with the Disabled Persons Protection Commission handled 2,688 complaints and 1,602 investigations involving allegations of abuse, mistreatment, or neglect of individuals with mental retardation. These figures represent an increase of approximately nine per cent over the previous fiscal year. Seventy-five cases were referred to law enforcement agencies for criminal prosecution.

In June, the DMR issued, "A Management Review of the Department of Mental Retardation, A Report on Work in Process." The report was a commitment Commissioner Morrissey made to the House Committee on Post Audit and Oversight to conduct a thorough review of the agency's management practices. This review focused on six key areas: risk management, workforce development, management information systems, the

FY98 Calendar Highlights

| ▼ | ▼ | January | ▼ |
|---|--|---|---|
| December 15 Commissioner Morrissey holds first of five Regional visits in Northeast Region. These visits announce new funding and thank the legislature for their support and recognize the accomplishments of local government and business. | December 17 Central Mass. Regional visit | January 5 Office of Program Development awards grants to groups and provider agencies that support innovation and program enhancement | January 8 Southeastern Regional Visit |

structure of local area offices, an external review of services and the purchase of services system.

Urban Youth Collaborative

For the seventh year, the Department sponsored the Urban Youth Collaborative Program (UYCP), a summer jobs program that places inner city youths in valuable summer jobs providing support to people with mental retardation. UYCP runs programs in 10 Massachusetts cities and places high school seniors and college students in an eight-week, full-time job working for private provider programs. UYCP reaches out to multicultural neighborhoods to introduce students to career opportunities in human service. Since its inception in 1992, more than 800 students have gotten jobs, changed career paths, helped people, and benefited from this program.

The William Monroe Trotter Institute of the University of Massachusetts at Boston published a report that recognized many of the positive attributes of the UYCP. The report found UYCP "is a well-designed and organized effort" that is being used "effectively to introduce youth to the human service and health professions." The study and findings were based on a series of meetings, interviews and group sessions held in various cities with students in the program, DMR and provider staff.

In the spring, the DMR has issued an advisory to ensure that all persons

involved in providing or monitoring supports to individuals with mental retardation understand that specific physical restraints and hold procedures are prohibited. The advisory, consistent with the guidelines issued by the Secretary of Health and Human Services, was issued to all DMR management and to executive directors of provider agencies.

Citizen Leadership

The importance of citizen participation in a state human service agency was emphasized by Commissioner Morrissey with the development of a new office that encourages families and self-advocates to play a more significant role in the agency. The Office of Citizen Leadership oversees, maintains contact, and works closely with all of DMR's citizens and community constituencies.

Ralph Edwards was appointed the new director of this office. In this role, he maintains and develops positive links with the Statewide Advisory Council (SAC), regional boards, community groups, organizations and enterprises to expand the coalition of support for people with developmental disabilities. The goal of the office is to increase opportunities and initiatives

that benefit people with mental retardation. Many positive steps occurred during the year including increased membership, more participation and input from area boards, and a day-long conference in March to explore common ground between facility and community families.

On June 24, more than 900 DMR and provider staff, self-advocates, family members, volunteers, and guests attended the 14th Annual DMR Human Rights Conference.



Tom Anzer, Director for Human Rights, (l.), Commissioner Morrissey with David Leal, brother, Jacalyn Leal, wife, and son Brent. The conference was dedicated to the late Donald Leal, who served with distinction as a Human Rights Specialist in the Southeast Region.

FY98 Calendar Highlights

January 14

Program Development awards innovation grants to groups and provider agencies

January 15

Metro Regional Visit

January 23

Western Regional Visit

January 27

Gov. Paul Cellucci submits FY99 House I Budget with significant expansion for Waiting List and other needs

Operations

The Operations Division is responsible for arranging and/or providing all of the services and supports the DMR offers to the state's citizens with mental retardation.

The Waiting List

The DMR issued an update to its 1996 report, "Facing the Waiting List Challenge: Responding to the Needs of Individuals and Families". The report was presented to both the Senate and the House Ways and Means Committees.

When the initial report was issued

in October 1996, there were 3,014 people in Massachusetts waiting for residential and/or day services. Two prominent characteristics of the waiting list were identified: the increasing numbers of individuals whose caregivers are 60 years of age and older and the influx of individuals turning 22 years old. The report called for multiple strategies to address the list including a three-year plan for new resources dedicated specifically for individuals waiting for services.

In FY 98, Governor Cellucci and the Legislature acknowledged the seriousness of this issue by support-

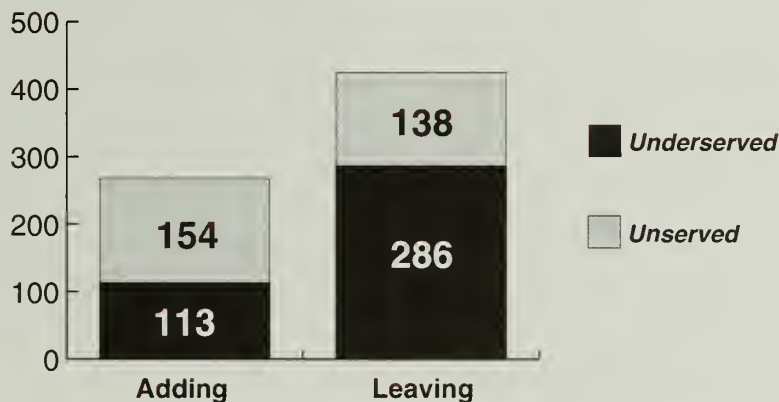
ing an appropriation of \$5.75 million. This was used in combination with base funding and family support funds to provide supports to 387 individuals who were on the Waiting List. Significant progress was made in addressing the Waiting List in that at the end of the fiscal year more people left the waiting list (424) than were added to it (267). In addition to the appropriation, other actions took place to address these issues including a series of family forums across the state, the creation of a grass roots organization called "Family to Family" to collaborate on solutions to the waiting list, and the establishment of family partnerships such as the Home of Your Own Program.

These programs and partnerships set the stage for a new coalition of support that successfully worked together to bring dramatic new funding in the FY99 budget to tackle the challenges of the DMR Waiting List and other priorities.

Revisions to the ISP Process

A workgroup was established to review implementation of the Individual Support Plan (ISP) process over the last year and make recommendations for improvements. Before making its recommendations, a series of public forums were

At the end of FY98, significant progress was made on the Waiting List. More people left than were added to it.



FY98 Calendar Highlights

March

March
DMR and the MR community hold 20 events and award ceremonies across the state in recognition of Mental Retardation/Developmental Disabilities Month

March 5
Local high school and college students Honored at Best Buddies/DMR Reception at JFK Library

March 25
Gov. Cellucci, Jack Williams, address 350 people at State House Partnership ceremony. Seventeen people and organizations are honored.

April

April 15
600 DMR staff, self advocates and family members attend DMR Annual Conference

scheduled statewide to solicit input from key stakeholders in the process, i.e., families, individuals receiving supports and agencies providing supports.

The work of the group and the input received resulted in a series of recommendations designed to reinforce the strengths of the process and provide clarification. Along with these improvements, the need for increased training, support and technical assistance was identified. These trainings are occurring in FY '99 with implementation of the revised process scheduled for the first of the year.

Facilities Score High on Active Treatment

All seven state facilities received positive surveys by the Department of Public Health in FY '98. The surveys are essential for participation in federal Medicaid programs and review the level of active treatment received by individuals living in these developmental centers. Staff from the seven facilities meet regularly to share best practices and to coordinate certification activities to ensure high levels of active treatment.

First Deaf Conference Held

In June 1996, DMR established a steering committee to help advise on issues surrounding individuals who are deaf or hard of hearing. The committee, comprised of both deaf and hearing professionals as well as

families, was instrumental in helping identify issues critical to the deaf and hearing-impaired community. As a result of the work of this group, the first annual deaf conference, "A Partnership for Change: Enhancing Supports for Deaf People with Disabilities," was hosted jointly by DMR, the Waltham Committee, Inc., and the steering committee at the Sturbridge Host Hotel on Nov. 13. The conference represented a continued commitment to the needs of deaf and hard of hearing individuals.

A position paper was unveiled that showed great understanding of the issues and set a vision for communication access, recognition of the deaf culture, and the establishment of practices that will promote and support the deaf and hard of hearing community.

Placements

The Department continued its efforts to offer individuals living in state facilities the opportunity to move to homes in the community. In FY98, 126 individuals moved from these facilities to begin new lives in communities across the state.

Area Project

As part of the agency's management review, a workgroup was



Self-Advocate Sao Brandt speaks at a legislative reception in Shrewsbury.

established to examine the role and functions of the area office and develop a new organizational model that reflects the changes in responsibilities and functions that have occurred over the last 10 years. This review pointed out the expanded role area offices now play in the organization and the complexity and stresses of the work. Current resources were catalogued as part of this review as well as a comprehensive list of functions. The workgroup was composed of Regional Directors and one Area Director from each region.

FY98 Calendar Highlights

| ▼ | ▼ | May | ▼ |
|---|--|---|---|
| <p>April 22 William Monroe Trotter Institute of the UMass Boston issues favorable evaluation report on the Urban Youth Collaborative Program</p> | <p>April 30 Investigations Advisory Panel Report Released</p> | <p>May 5 DMR/UMass Hold Annual Meeting</p> | <p>May 6 AFSCME-SEIU sign agreement with DMR/DMH on training and workforce development</p> |

Legal

The Office of the General Counsel is responsible for providing legal services to DMR on all legal matters that may arise in connection with DMR's authority and responsibility as a state agency for the delivery and regulation of mental retardation services.

FY98 was very busy for the legal office. The regional lawyers, whose primary responsibilities are to advise the regional and area office staffs and to represent the DMR in matters before the probate and district courts, handled 804 guardianship cases, 1,518 Rogers cases for authorization to treat with antipsychotic medication, 70 extraordinary treatment and life sustaining treatment cases, 12 protective services cases involving victims of abuse, 144 criminal matters where the victim or alleged perpetrator is a person with mental retardation, and three ISP hearings.

The labor lawyers handled 92 labor arbitrations, 20 civil service cases, 11 labor relations commission cases, 44 MCAD cases, and 106 workers compensation cases. The investigations appeals group resolved 22 appeals since the legal office assumed responsibility for that function in January of 1998.

The legal office was also successful in working with other state officials in resolving certain legal matters. Working with the Attorney General's office, settlement was reached early in the fiscal year on two lawsuits, *IDDI v. Weld et. al.*, and *Judge Rotenberg Educational Center, Inc. et al. v. Campbell, et. al.* The DMR continued to work cooperatively with the Hon. Lawrence T. Perera, the court appointed receiver who oversees all matters involving the Judge Rotenberg Education Center to insure there is full compliance with court orders.

In the Spring 1998, five felons were ordered by a federal court to make restitution of almost \$500,000 to the Commonwealth in a criminal case the legal office had worked closely with the State Auditor's office and the U.S. Attorney's office in pursuing.

There were other projects and initiatives where the legal office played a prominent role. Following the findings of the House Post Audit and Oversight Bureau on DMR investigations, the legal office served as technical adviser and support to the DMR Investigations Advisory Panel. Since the issuance of the Panel's report, the legal office has helped spearhead the Department's

efforts in establishing an investigation system consistent with the Panel's recommendations.

As a member of the District Court Subcommittee on Mental Retardation, the DMR lawyers participated in the trainings of probation and parole officers throughout the state to familiarize them with the issues presented by persons with mental retardation in the criminal justice system.

On the policy front, the legal office chaired the DMR Policy Review Committee which is responsible for reviewing all current departmental policies and identifying the need for new ones, and a working group looking at the statewide use of restraint. The legal office also took the lead in re-establishing the DMR Advisory Panel on Classification of Behavior Modification Interventions.

The promulgation of the new ISP (Individual Support Plan) regulations took place in Fiscal Year 1998. Among the more significant changes were the change in eligibility for adult services and the establishment of criteria governing eligibility and priority of children seeking DMR services.

FY98 Calendar Highlights

| June | | | | |
|---|---|---|---|--|
| ▼ | ▼ | ▼ | | ▼ |
| May 12 Labor/management complete ISP revisions | May 22 Belchertown Cemetery Renamed Warner Pine Grove Cemetery in Honor of Albert Warner | May 28 Two DMR staff honored by Commonwealth for work in reducing costs and improving operations | June 24 900 Attend 14th Annual DMR Human Rights Conference | June 26 "Management Review of the DMR, A Report on Work In Progress" issued |

Policy, Program Development, Children and Families

The Office of Policy, Planning and Children's Services is responsible for managing the Family Support Program, Children's Services, Human Resource Training and Development, Policy Development, Strategic Planning, Data and Information Management, and Special Projects.

During FY98, this office developed a set of management indicators in accordance with the DMR goals set by the Commissioner. The first set of indicators addresses service excellence and measure supports, services, and revenue initiatives that effect the people supported by the DMR. Indicators showed progress such as—

- 98.4% of targeted community placements made.
- More than twice as many people had left the unserved and underserved waiting list as were added.
- 96.3% of 12,742 ISPs were updated within one-year requirement.
- 100% of Revenue Target—\$309.7 million was achieved.

Other goals developed in FY98 for FY99 measures are Organizational Coherence, Workforce Development, and Partnership with Communities.

DOE/DMR Project Success

The Interagency Agreement between the Department of Education (DOE) and the DMR that keeps families together and avoids residential school placements grew significantly. During the Fiscal Year, growth of the project continued. An additional \$200,000 was obtained to support new students into the Project above and beyond the \$3.75 million already earmarked for supports to families.

During FY98, there were 163 students participating in the Project. Of these, 37 students had returned from .6 residential school placements. The remaining 126 had utilized the Project to obtain a diversity of supports as an alternative to an initial residential school placement.

Of the students seeking flexible supports as an alternative to initial residential school placement, the average per student cost for these supports was \$20,817. The average share DOE paid for residential school

placements for FY98 was \$46,263. Thus the actual expenditures represent a 56 per cent reduction in expenses compared to the average cost if these same individuals had chosen residential school alternatives. This has resulted in an overall savings of more than \$3.2 million.

Best Buddies Reception at JFK Library

On March 5, Best Buddies International Founder and President Anthony K. Shriver joined the DMR and Best Buddies Massachusetts for a reception honoring individuals with mental retardation and their peers. Best Buddies enhances the lives of people with mental retardation by providing opportunities for socializa-



Anthony Shriver (L.), greets Annie Salter and Kerri Spindler-Randa from Wachusett Regional High School at the March 5th Best Buddies reception.

DMR Senior Staff

Gerald J. Morrissey, Jr.
Commissioner

Mary Ann Brennan
Chief of Staff

Margaret Chow-Menzer
General Counsel

Janet George, EdD
Assistant Commissioner Policy
Planning and Children's Services

William Hetherington
Assistant Commissioner
Management and Finance

Dorothy Mullen
Assistant Commissioner
Quality Management

Larry Tummino
Assistant Commissioner
Field Operations

Teresa O'Hare
West

Diane Enochs
Central

Amanda Chalmers
Northeast

Richard O'Meara
Southeast

Jeffrey Keilson
Metro

tion among peers. Also in attendance were legislators whose presence showed their continued support of the collaboration of DMR and Best Buddies Massachusetts.

Collaboration and Innovation Grants

The DMR and the University of Massachusetts announced the recipients of a statewide grant competition. DMR is providing more than \$100,000 to fund these grants.

This office also awarded grants to fund activities that promote and support innovation. The grants are awarded based on a competitive state-wide process for broad based system change activities.

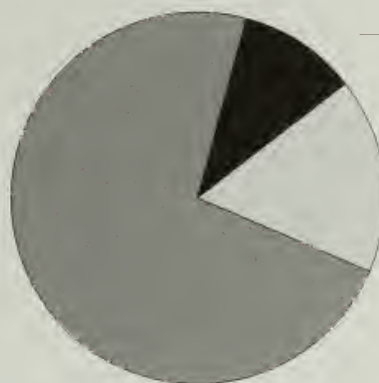
Creation of Focal Point for Data

Over the years, DMR has worked with national survey organizations, other states and research institutes, to share data, analyze policy issues and solve common problems. In FY98, this office consolidated this function within the Office of Policy and Planning to create a single focal point for all of this information.

Children's Services and Transition

During the past several years, the DMR has promoted and supported various school-to-work and adult life initiatives that enhance the movement from school to community living and participation through employment, recreation, and development of relationships. This office made a presentation to the Governor's Commission on Mental

Residential Services as of June 30, 1998



State Operated
Community 10.3%

State Operated
ICF/MR 17.1%

Purchase of
Service 72.6%

8,579 people received DMR residential services

Retardation, and prepared a report *Summary of School-to-Work & Adult Life Initiatives*.

The DMR has provided stimulus and support to transition initiatives including:

- Each of the DMR regions received funding and developed transitional initiatives.
- Two of the UMass/DMR Collaborative projects, in Rockland and Newburyport, received funding to promote school-to-work activities.
- The DMR awarded funding to the Institute for Community Inclusion at Children's Hospital/UMass Boston to work with selected students in five school districts.

In addition, DMR continues to be an active member of the statewide coordinating committee, the Massachusetts Partnership for Transition.

Robert Wood Johnson Grant

The Robert Wood Johnson grant is in its second year. In FY98, DMR received approval to continue its grant into a third year.

Significant strides have been made this past fiscal year. They include:

- The Development of Family Governing Boards. The Haitian American Public Health Initiative Family Board hired a job developer and has successfully created placements for three people. In the Latino community, two

DMR Statewide Advisory Council

Jon Johanson
Somerville, Chairperson

Arnold Booth
Beverly

Lucie Chansky
Newton Centre

Gustav Christensen
Lexington

Robin Foley
Worcester

Luan Giannone
Andover

Cheryl Holmes
Jamaica Plain

Richard Krant
Norwood

Pauline Litchfield
Duxbury

Ann Paszko
Lancaster

Gary Siperstein
Marblehead

Daniel Shannon
Plympton

Rhody Stone
Kingston

Alice Taverna
Russell

Family Boards, both attached to the Latino Health Institute, are working to join forces to create one Board.

- The Provider Component of the grant is moving along with two provider organizations examining what it means to deliver choice-based services that are not configured in traditional ways.
- A Pilot Program for Service Coordinators. The caseloads of two of the Service Coordinators are completely dedicated to flexible approaches (about 80 individuals and \$4 million). In other area offices within the Metro Region, Service Coordinators have begun to identify others who would benefit from self-determination.

Training and Staff Development

The DMR has formed a Workforce Development Partnership with the University of Massachusetts through the Donahue Institute. The partnership will initiate a range of educational and training activities over the next decade for the purpose of developing a well-prepared and trained workforce. The DMR has also engaged the Donahue Institute to develop and implement a training and staff development program for supervisory staff at all levels.

The Regional Departments of Training and Staff Development continued to offer a variety of learning experiences to provider and

DMR employees, self advocates and families. The Core Competency Training formed the base of this activity, and was offered regularly in each region. In addition, a wide range of training, workshops, conferences, and collaborations with community agencies and colleges provided learning opportunities.

ILEX

This year staff learned first-hand how European countries provide support to people with mental retardation. Through a contract with the Nemasket Group, 11 European fellows

visited 10 agencies across the state. The fellows are graduates with the equivalent of a bachelor's degree trained to work in the field of human services. In addition to monthly fellows meetings, meetings were held with the fellows and managers and supervisors from their agencies. Three elements were identified as being crucial to good practice and worthy of further discovery; reflec-

tion, teamwork and supervision. This program will continue with an expanded group of fellows next year.

LDI

Twenty-five people from across the state attended and graduated from this year's Leadership Development



Representatives from the ILEX project were honored at the March 25th Recognition Day. Pictured are: Katja Sandfort, (I.) from Germany, Bettina Meichtry, (I.) from Switzerland, Yvonne La-Garde, Lifelinks, Inc., and Jerry Schwartz, DMR Northeast Training Director.

Institute (LDI). The participants included self-advocates, family members, and state and provider employees, ranging from direct care staff to executive directors. The 10-month series focused on supporting emerging leaders to deepen their own commitment to people with disabilities and evaluate the directions in which they might exert leadership.

DMR Human Rights Advisory Council

Thomas Anzer
Director for Human Rights

Matthew Engel
Northampton, Chairperson

Barbara Cutler
Arlington

Gunnar Dybwad
Wellesley

Florence Finkel
Sharon

Pat Freedman
Boston

Stan Goldman
Boston

Ellis Katz
Andover

Edwin Mikkelsen
Wellesley

Lenore Piper
Providence, RI

Raymond Plouffe
Waltham

Carol Tubman
Wollaston

Quality Management

The Quality Management Division is responsible for certification of DMR providers, compliance with the requirements of the federal Home and Community Based Waiver and Title XIX Programs and oversight of systems related to health and risk management issues.

In FY98, the scope of responsibility for this office was expanded to reflect the DMR's commitment to strengthen its systems for supporting individuals to live quality lives in a safe, healthy and affirming manner. The office, which was changed to the Office of Quality Management in September, began a series of initiatives to both enhance existing systems and develop new approaches to supporting individuals and strengthening the network of safeguards.

Initiatives included a broad revision of the survey and certification process, development of a DMR Risk Management system, strengthening of systems for behavioral/psychiatric supports, implementation of the Medication Administration Program Improvement Plan and development of a DMR Mortality Review Process.

Survey and Certification System

With four years of experience in implementing the survey and certification system, FY'98 was a year of

assimilating the comments of both internal and external stakeholders. Input was sought from an array of individuals and groups, and efforts are well underway to make the survey tool and process more accessible, "user friendly", informative and efficient.

At the end of FY'98, all 194 providers subject to certification had been through at least two complete surveys; with 64 having gone through three surveys. Of the 194 providers, 20 per cent received a two year certification with distinction, 45 per cent received a full two year certification, 15 per cent received a one year certification and 19 per cent received a one year certification with conditions. Requests for reconsideration of survey findings dropped from 12 per cent of total surveys to 4 per cent, a considerable improvement. A joint effort between Quality Management and Operations staff has been undertaken to identify those providers who have been certified in conditions for multiple surveys. The intent is to provide ongoing technical assistance and support to providers who are working to improve the quality of their supports. In FY98, all providers offering site based respite services were surveyed, a process that will be incorporated into the routine survey and certification process.

Reliability Study

The office conducted a second reliability study in an ongoing effort to review and improve the reliability of the survey process. Results yielded a reliability factor of 82 per cent. While this is an excellent outcome, the report also pointed out areas where surveyor training needed to be improved, as well as areas where the survey tool could be strengthened and clarified.

The Human Services Research Institute published the results of a national study funded by the Health Care Financing Administration on eight states utilizing outcome based evaluation systems. The report highlighted the innovative nature of the survey and certification system, and its ability to measure important aspects of individuals' lives. Recommendations to increase efficiency and conduct a validity study have been adopted by the Office of Quality Management in its work to improve the process.

Risk Management System

The Office of Quality Management directed the DMR effort to develop a statewide Risk Management System. The system is geared to address the challenge of balancing the responsibility as a public agency to keep individuals safe with the goal of

▼ Governor's Commission on Mental Retardation ▼

Marty W. Krauss, Ph.D.
Chairperson

Betsy Closs
Administrator

Allen C. Crocker, MD

Florence S. Finkel

Donald Freedman, J.D.

Dafna Krouk-Gordon

William J. McIlvane, Ph.D.

Mary E. McTernan, Ph.D.

John W. Nadworny, CFP

Robert W. Riedel

Ruth K. Shir, LICSW

Richard Vincent, D.C.

promoting independence and self determination. The Department's Risk Management System will be designed to foster partnerships with key stakeholders, provide the necessary clinical, legal and administrative supports to staff and create an environment that fosters learning and communication. One component of the system, the Critical Incident Reporting Process, provides immediate communication to senior management of all major incidents involving individuals supported by DMR.

Medication Administration Program

FY98 was also marked by efforts to strengthen the statewide Medication Administration Program through enhanced training and oversight systems.

The Medication Administration Program is the system by which individuals living in the DMR and DMH community systems receive prescribed medication. The program is overseen by the Department of Public Health and has been the subject of extensive review. DMR has worked closely with other agencies and the Legislature to review all aspects of the program and began implementation of a comprehensive plan to strengthen the system.

Improvements are planned in the medication administration training program for staff. The staff certification test will be centralized to ensure testing is done in an objective and consistent manner. Clinical nursing oversight procedures were also developed, including the expanding availability of on-going technical support for provider staff. A new Director of Health Services was hired, whose major responsibility is to ensure the effectiveness of the Medication Administration Program and each region has designated a full time Medication Administration Program Coordinator.

Mortality Review

Efforts were undertaken to

strengthen monitoring systems and oversight responsibilities in the area of mortality review. A Mortality Review Committee, with internal representation from senior DMR clinicians and managers, and external representation from the Department of Public Health and the Governor's Commission on Mental Retardation, was formed. This committee will establish a uniform reporting system; develop a review process to identify and provide direction in addressing and/or preventing potential health and safety issues; and collaborate with other DMR oversight systems.

Psychiatric Services

Efforts to improve the quality and availability of inpatient psychiatric supports to individuals supported by DMR were initiated through a collaborative process with the Department of Mental Health, The Department of Medical Assistance and the Massachusetts Behavioral Health Partnership. As a result of this initiative, three specialty units for individuals with mental retardation who require psychiatric hospitalization were designated and will receive increased funding to support the additional requirements for serving dually diagnosed individuals.

Pathfinder Awards

Each April at the DMR Annual Meeting, Pathfinder Awards are presented to outstanding staff. This year the conference presented a Commissioner's Award and six pathfinder awards to staff or groups across the state.

Commissioner's Recognition Award

Barbara Pandolfi
Service Coordinator
DMR Merrimack Area Office

Pathfinder Award Recipients

Central Office

Carol Zurek, Service Coordinator
Statewide Coordinator of Deaf Services

Western

The Amherst Person Centered Planning (PCP) Project
Nancy Birmingham, Barbara Bruce, Roger Caouette,
Sharon Cormier, Jane Diamond, Mary Gates,
Christen Lenard-Detour, James Nelson, Deb Ray, Laura Squires

Metro

Mary Reyenger, Service Coordinator
West Boston/Brookline

Central Mass

Celia Brown, Children's Coordinator
Worcester Area Office

Northeast

Cynthia Crothers, Service Coordinator
Metro North

Southeast

Kathleen Stoffel, Habilitation Coordinator II
Adult Education Coordinator, Quinn Program Center
Wrentham Developmental Center

Management & Finance

The Office of Management and Finance is responsible for fiscal management and providing administrative support to the DMR.

In FY98, the DMR expanded and renewed its Medicaid Home and Community Based waiver that creates opportunities for states to expand services to individuals with mental retardation who live in the community. As of FY98, Massachusetts covers some 10,162 individuals for \$183.7 million in federal funds. By the year 2002, this waiver has the potential to expand to cover some 12,600 people for \$253.7 million in funding. In the ten years, the DMR has participated in this waiver, it has grown from \$2 million in revenue serving 100 consumers to \$184 million serving 10,162.

The DMR received \$1.6 million as part of the Commonwealth's Revenue Optimization Campaign for projects that began in FY98. These projects represented creative approaches to finding new ways to optimize reimbursements, streamline systems and improve our overall management of revenue operations.

The \$1.6 million must be spent within the next two years on items which are "one time" in nature. Past revenue optimization funds were used in areas such as technology, home improvements, and workforce development.

Performance Enhancement Commission

The DMR participated in the Commonwealth's Performance Enhancement Commission (PEC) to improve management systems and enhance the performance of government agencies. The list of projects that DMR worked on throughout the year included:

- Changes to speed up payments to providers
- Piloting a direct deposit system for all employees
- Using electronic debit cards to perform routine purchases in support of the community residential system.
- A public service campaign on employment supports.

New Web Site

The DMR developed a website on the internet, located at www.dmr.state.ma.us. The site offers basic information about the Department, mental retardation, support services, links to other topic areas, publications, news releases, and other general information. The site has received thousands of inquiries since it became operational in December.

IMPACT MM Tracking System

In FY98, the Office of Management & Finance along with representatives from the DMR Regions,

formed a work group to develop a standardized system for tracking the Department's Purchase of Service dollars. The "MM Tracking System" was the last module of the Department's IMPACT (Integrated Management, Payroll, Accounting, Contract, Tracking) system developed and implemented in FY97.

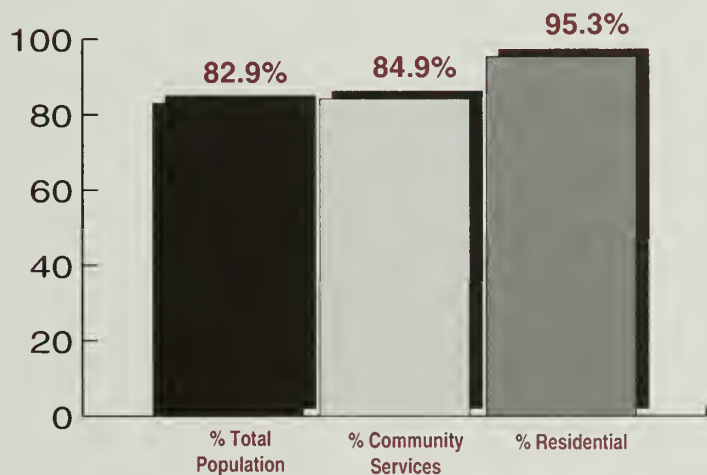
This system relies on a daily download of data from the statewide Comptroller Information Warehouse that includes recently approved contracts, amendments and payments. Regions also have the ability to distribute and track Purchase of Service Dollars at the area or internal manager level.

DMR's Central Region was the pilot for MM Tracking during FY98, and implementation was scheduled for July 1, 1998 for 100 per cent use by all Regions in FY99.

Revenue Navigator

FY98 was the first year of implementation for the "Revenue Navigator," a management tool developed for Regional Revenue Staff to

Medicaid Eligibility as of 6/30/98



monitor Consumer Registry , contracts, HCBS Waiver billing, Medicaid, Facility Discharges, and Turning 22 populations.

Reports were designed to highlight critical information on potential billing errors and gave the Revenue staff a tool to make the appropriate corrections on data problems. Numerous regional staff such as regional directors, revenue directors, area directors, service coordinators, contracts staff and other regional management staff rely on the reports that provide a financial management system to maximize revenue for DMR.

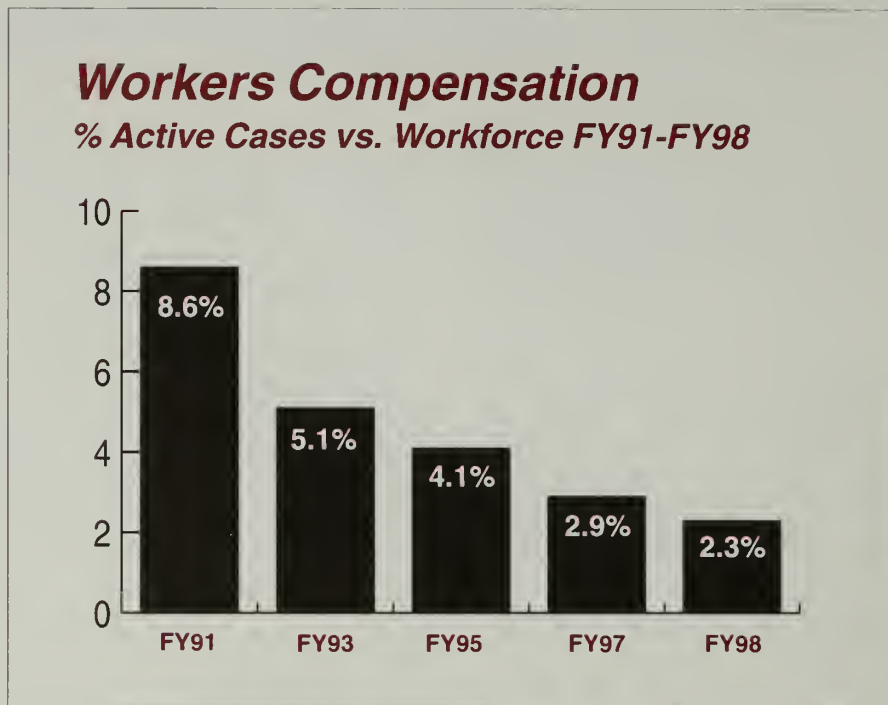
Human Resources

The Human Resources Office was reorganized during FY98. The Department hired a Director of Human Resources, Roger Tremblay, to coordinate the work of this office in November 1997. Prior to this year, there existed a Personnel Services Unit and a Labor Relations Unit. During FY98, the Workers' Compensation Unit was added. The Workers' Compensation Unit hired a new Director in October of 1997.

AFSCME/DMR Agreement

On May 6, the Alliance - AFSCME and Local 509 unions - signed an agreement with representative of the DMR, the Human Resources Division and the Department of Mental Health. Various initiatives such as the creation of career changing training initiatives; possible expansion of job opportunities in the community; and utilizing similar positions in other Commonwealth agencies will assist AFSCME and 509 membership when there is a change in the service delivery system. Employees of Dever, who are part of this agreement, will be provided a viable offer of employment.

Out of this agreement, the Commonwealth developed an LPN Career Enhancement Program. Seven employees from the Department of Mental Retardation were accepted for



the 1998-1999 academic year. Once the employees successfully complete the course and pass the licensing exam as a practical nurse they will be placed in a LPN position with the Department.

With respect to the further job opportunities in the community, there was a request made to the Legislature by the parties for 25 Service Coordinator positions that was approved to be filled during FY99.

The Human Resources Office has been working on: clarifying the Federal Family and Medical Leave Act as it pertains to collective bargaining agreements, the Americans with Disabilities Act, and Workers Compensation benefits; playing a major role in assisting the Commonwealth's Human Resources Division in designing and implementing the new Human Resources Compensation Management System (HRCMS); and developing a consistent approach to human resources applications throughout the Department.

During FY 98, savings were once again realized in the area of Workers' Compensation in the amount of \$2.2

million from the preceding fiscal year. And compared to FY97, there were approximately 300 fewer employees receiving Workers' Compensation benefits.

Clean States

DMR worked on two initiatives under the Clean State program in FY 98.

Underground Storage tanks: DMR will meet the impending federal and state deadlines to upgrade, close or replace all underground storage tanks by Dec. 22, 1998. DMR engineering began compliance efforts in earnest in FY 98. DMR had 116 tanks, located at the facilities that required upgrading, replacement or closure by the deadline.

Environmental Audits: The Executive Office of Environmental Affairs mandated that all state owned facilities receive Environmental Compliance Audits. At least (and no more than) 25 per cent of all facilities had to be audited by June 30, 1998. The findings included notations that the facilities were well maintained and that on-going activities were in place to minimize pollution and promote resource conservation.



Central Region

Diane Enochs, Regional Director



This Region provides support to more than 4,000 individuals and families throughout Central Massachusetts. It operates 200 smaller community residences and three large facilities; the Monson Developmental Center, Templeton Developmental Center, and the Glavin Regional Center. The Central Region has established a record of innovation in developing quality family supports and a demonstrated capacity to work with families, providers, local governments and businesses to provide quality results. These are some of this region's accomplishments for this year.

A Regional Employment Service was developed in the Central Region utilizing existing staff resources from the Glavin Regional Center and Monson Developmental Center. This service resulted in 14 new job opportunities for people in integrated or individual employment. This program competes with other provider agencies to provide employment supports.

This region and the Worcester Public Library developed a resource library for families who have children with special needs. The Family Information Collection includes topical information on autism, child development, education, home adaptation, parenting, recreation and special health needs. Books are available through interlibrary loan. It was funded by a DMR Region II Innovation Grant, DMR Training Council, and the Autism Resource Center of Central Massachusetts.

Advisory Board development was a strong focus in the North Central Area and resulted in three successful new collaborations, including a Board sponsored in-service training on guardianship issues; an orientation program for Board members which has been suggested for use as a model state-wide; and applying, receiving and administering a mini-grant to provide computers to individuals living in DMR residences.

Positive working partnerships with the local school systems and Special Education Directors in the Central Region have developed and led to better functional transition planning, five collaborative projects, and receipt of two innovation grants developed by SPED Directors and Area Office staff. The second annual Inclusion Awards Banquet was also held to honor five teachers/school teams that demonstrated excellence in promoting inclusion of children

with disabilities.

The Central Region sponsored several successful conferences and other events including a Community Health Fair in partnership with 28 community organizations; a workshop on self determination; a state-wide conference/workshop on Dysphasia; two self advocacy workshops; and a three-day workshop focusing on community membership and person centeredness. The Central Region was also represented at the Annual AAMR Conference with a presentation by two staff from Templeton Developmental Center on treating individuals with sexually offending behaviors.

Through an interagency agreement with the Department of Environmental Management, several miles of public walking trails on the grounds of the Templeton Developmental Center were open to the public.



Commissioner Morrissey (r.), meets with self advocates Joe Donovan and Maureen Lambert from the Monson Developmental Center at a Central Mass luncheon.



Southeast Region

Richard O'Meara, Regional Director



The Southeast Region supports people to live, work, and enjoy the offerings of 70 historically beautiful communities that comprise our region. From the small villages located on the hundreds of miles of coastline, to the culturally rich cities, people with mental retardation have become a part of their communities, and are living rich full lives as neighbors, friends, workers, and patrons of local business.

This region has moved well beyond the practice of simply "placing" people into communities. The commitment and activities of the six DMR area offices (Brockton, Cape Cod and the Islands, Fall River, New Bedford, Plymouth, Taunton-Attleboro), our boards, and staff of our state operated services (Dever Developmental Center, Wrentham Developmental Center, Southeastern Residential Services) have redefined what we mean by "community." Social integration and community membership are goals for the people we serve. In order to accomplish these goals we have played a part in the communities into which people will integrate. Ultimately, as a result of reaching out in partnership to communities and families, the people we support have more easily been able to make contributions to, and be accepted within their communities.

The following examples illustrate ways in which the Southeast has partnered with local communities on behalf of people with disabilities.

Children with disabilities can now play independently with their friends on playgrounds in Fairhaven and Pembroke. The

Plymouth and New Bedford Areas worked with local families and community leaders to support and contribute to the construction of playgrounds so that all children, those with disabilities and without, could play independently with their friends.

The Plymouth and Taunton Attleboro offices coordinated holiday gift giving for hundreds of needy families.

New Bedford, Fall River and Brockton Areas have been working with the religious communities in the areas to address the spiritual needs of the people we support.

The Cape Cod and Islands Training Committee sponsored a conference on Individual Community Supports and Services for students, families, and teachers.

The Wrentham Developmental Center set a single day record for volunteerism on June 25 when 150 people from a community organization participated in campus beautification projects with the people who live at Wrentham.

Twelve individuals from the Plymouth area who were instrumental in creating partnerships that in some way benefited individuals with mental retardation and their local communities were honored. Recipients included business

leaders, teachers, employers, as well as people supported by DMR.

The Fall River area has assisted in the development of the Portuguese family group, where 20 families attend and discuss concerns their families share in common.

In Brockton, parents meet monthly and invite speakers to come and discuss issues such as medical insurance and working with school systems. Many of the areas have also developed support groups for families with very medically involved children and other specialized needs.

The Southeast Region contributed substantial human and financial resources working in partnership with local communities. Last year, more than \$60,000 in grants was awarded to support approximately 20 projects.

A very important part of this region's work involves assisting people, who live at the Wrentham and Dever Development Centers, to leave and become reinvolved in their new communities.



Rep. James Fagan, (D-Taunton), Commissioner Morrissey, Sen. Mark Montigny, (D-New Bedford) during the Southeastern Regional visit.



Northeast Region

Amanda Chalmers, Regional Director



The Northeast Region of the state welcomed a new Regional Director this fiscal year.

Mandy Chalmers was named Director of the Northeast Region. Prior to this appointment, Mandy served as the Deputy Regional Director. She brings a wealth of experience to the position having worked in the agency for 25 years.

Other significant accomplishments of this Region include:

Self-determination

The Region sponsored a successful event to recognize and honor individuals supported by the Department who demonstrated accomplishments in the area of self-determination and self-advocacy.

Some individuals who participated in the Regional Self-Advocacy Committee, joined in a regional Internet Committee to learn how to use the Internet. They were able to contact others with disabilities and share their experiences.

Additionally, the Region sponsored an on-going forum to explore how individualized budgets could be used to promote self-determination. Service Coordinators were instrumental in this endeavor.

Regional Strategic Planning

The Northeast Region began an annual strategic planning process in 1996. Administration, management and clinicians worked to develop a regional strategic plan that embraced both community and facility staff toward common goals. The group has established open ended communication, identified issues and

successes and brought other professionals in to support their goals.

Some recent achievements included a successful conference on "The Importance of Relationships" with John O'Brien as speaker and moderator. More than 200 people attended representing many types of supports and services. Follow up meetings occurred to further delve into the topic in a unified effort toward supporting meaningful and freely given relationships to people served.

Another outcome of past strategic planning sessions involved the development of a number of home ownership opportunities.

Children's Supports

A Children's Regional Interdepartmental Team was established to promote better communication and to resolve common issues and challenging individual situations. Staff from several EOHHS sister agencies meet regularly to share resources and information, to educate each other regarding their roles and responsibilities and to resolve difficult issues. In June, the group held an educational forum for the Essex County Juvenile Justice System to teach court personnel about their roles.

A Regional Children's Eligibility Review Committee was developed to provide expertise, technical assistance and support to area eligibility efforts and to review all cases where children were determined not eligible. The Committee provides people who are deemed ineligible with strategies to assist them in locating appropriate supports and services.

Northeast Leadership Institute

The Institute was developed to promote leadership skills for individuals served, their families, and DMR and provider staff. The Institute has been designed to bring people together who are committed to become more effective leaders and to provide them with state of the art information and strategies on leadership that will address their many shared issues. Participants gain skills and knowledge that will assist them to become active leaders in systems change, policy making and the development of more enhanced supports for individuals served.

Diversity

A major diversity conference was held to support collaborative efforts and education about the importance of sensitivity. A leadership series was offered to people of Hispanic and Cambodian heritage. Another goal of the Diversity Committee is to reduce prejudice, support intergroup conflict resolution and coalition building.

Workforce Development

The Northeast Region works in collaboration with providers on the issues of workforce development. Regional staff established a working committee to tackle the issue of recruitment, retention and support of direct care staff. Additionally, the partnership with local community colleges, universities, and the community-at-large was expanded to provide greater opportunity for staff to pursue career development in the field of human services.



Western Region

Teresa O'Hare, Regional Director



The Western Region has engaged in activities over the past year that have enhanced opportunities for the individuals whom we serve, and we have worked to support the employees who have made those opportunities possible. Sixty individuals were served from the wait list using wait list funds, base resources and family support. Eighteen people who turned 22, 92 families and 37 children also began receiving services from DMR.

Diversity Initiative

The Region has completed the first stage of the Diversity Initiative, a project that seeks to increase diversity awareness in staff. The Region also funded several Family Support initiatives with the goal of increasing diversity awareness and outreach to individuals and families of various cultures including the Multicultural Families of Amherst, Springfield Vietnamese-American Civic Association, African-American Family Outreach Project with the Berkshire County ARC, Comunidad De Latinos Unidos with Berkshire Family and Individual Resources, Inc. The outreach to diverse communities began a few years ago through a joint DMR/provider initiative called "Project Roots" under the leadership of Raquel Rodriguez, Coordinator of Multicultural Supports.

The first annual Inclusion Awards ceremony was held on Sept. 25, at the William J. Dean Technical High School in Holyoke. This event recognized 30 educators nominated by families from 13 school districts in Franklin, Hampshire and Hampden counties. The Inclusion Forum illustrated the collaboration among

students, families, school and the Department.

In the Springfield Area the Complex Medical Needs Task Force developed as an extension of the Brown Bag lunches that were held by DMR and a group of providers. These lunches were a means for provider staff and Department staff to address issues that affect both groups. There were many concerns raised about the complex health issues affecting the people we serve, including discharge planning - the need to have proactive rather than reactive plans for individuals leaving the hospital or nursing home. The task force has created an effective discharge planning process as well as consolidating training opportunities so both providers and DMR staff can benefit. The task force uses its collective resources to cohesively address health care issues affecting individuals and serves as an educational forum.

In November, more than 120 direct care staff, from provider and state operated agencies, attended the third annual direct care conference, entitled, *Direct Care Challenges in Changing Times*. It was sponsored by the Region and the Western MA Vendors Trainers Working Group. The keynote speaker was George Ducharme, co-founder of Communitas in Connecticut.

New Area Directors

This Region appointed several new area directors this year. Damien Arthur was named the new Area Director for Westfield. Miguel Arce became the Area Director for Holyoke/Chicopee, and William Zimmer was appointed Area Director

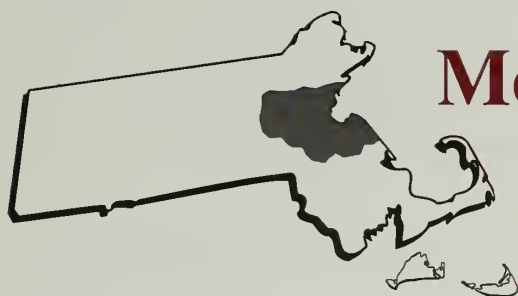
for Franklin/Hampshire.

DMR regional and area staff began meeting with a group of supported employment providers to assess the Region's progress and current state in supported employment, and to identify challenges that need to be addressed to ensure people with disabilities have real work opportunities.

In May, Albert and Agnes Warner, of Amherst, were honored at an event that was hosted by the Region to celebrate the rededication of the Pine Grove Cemetery. The Pine Grove Cemetery, established in 1925, served as the burial place for people who had lived at the Belchertown State School. Through the Warner's advocacy, many changes were initiated. The legislature appropriated funds to construct a new entrance. In May 1998, through an act of the Legislature, the cemetery was renamed the Warner-Pine Grove Memorial Cemetery in acknowledgment of the Warner's efforts and love on behalf of their friends



Albert and Agnes Warner at the dedication ceremony of the Warner-Pine Grove Memorial Cemetery in Belchertown.



Metro Region

Jeffrey Keilson, Regional Director



The Metro Region provides supports to more than 9,000 people with disabilities and their families, in 65 cities and towns, and at the Fernald Developmental Center and the Marquardt Nursing Facility in Waltham.

Dimitri Triantafilakis was appointed the new Area Director for Greater Boston. Dimitri brings more than 20 years experience in human services to this position.

Over the past year our focus continued to be on the needs and desires of the individual, fostered by a grant from the Robert Wood Johnson Foundation to support self-determination for persons with disabilities. There are many exciting initiatives and accomplishments in the Region that embody the different approaches that must be taken to

translate our mission into reality for the diverse population we support. Barriers exist within ourselves, our systems, and within the people who need to be reached, but they can only be successfully supported by very special outreach. The following represents some of our successes:

Self Determination Initiative

The Region's Self Determination Initiative is in its second year. The three pilot groups; State Government, Provider, and Family Governance will engage up to 750 individuals or families. Service Coordinators throughout the Region have helped facilitate the implementation of customized supports. One young man, interested in public broadcasting, got a job as a radio dispatcher for a small family owned transportation company. He decides on and purchases the support he needs and is

enrolled in a computer class to improve his skills.

There are Family Governing Boards representing the Haitian, Latino, African-American, and Asian communities, and a Board whose children receive health care at Boston Medical Center. More than 30 families are on the boards, and 400 individuals and families are now getting support. One of the boards is controlling work support resources, and eight individuals are participating in this initiative. In one example a woman who loves to sew, works in her neighborhood with a local dressmaker. In addition, families and individuals from various ethnic backgrounds have met with translators to share similarities and experiences.

Individualized Supports

There a number of initiatives in the Region to help people gain more control over their lives as a result of our increased emphasis on person centered supports. One is the literacy program. One hundred people have participated in literacy classes, one group teaching literacy and English as a second language to Haitian adults with mental retardation. Students participated in the writing of a literacy textbook. A former homeless person, in Greater Boston, was hired to engage 20 individuals who have been very resistant to support.

Home ownership has expanded. The Charles River West Area has a social group that has involved more than 40 individuals on the waiting list. This creates opportunities for people to find compatible housemates. An increasing number



Commissioner Morrissey, (l.) looks on as Jeff Keilson, Metro Region Director, and Carmella Salvucci, artist from Gateway Crafts, present her artwork to Rep. Angelo Scaccia, (D-Boston) for his work on behalf of people with disabilities, on January 15, 1998.

of individuals are initiating changes in their lives, by making decisions about where they want to live, who they want to live with, and how their supports are delivered.

Responding to the complex clinical needs of people with mental retardation continues to be a priority. Two hundred people attended major clinical workshops covering the topics of Brain Injury, Borderline Personality Disorder, Augmentative/Alternative Communication, and Dual Diagnosis.

The Region introduced "Ask a Nurse," an electronic bulletin board, providing health and medical information. Within the 12 month period, there were 8,000 inquiries and 35,000 postings read.

The needs of individuals with Alzheimer's and their families are being more successfully addressed. Nursing staff, with a goal of comprehensive community outreach, have provided a number of trainings to community agencies, hospitals, health centers, and families to increase capacity to more effectively support individuals with Alzheimer's. The Newton/South Norfolk Area has a successful collaboration with the local community elder service network and the Executive Office of Elder Affairs. The Region co-sponsored its third annual elder conference attended by more than 300 staff, self-advocates, and family members.

DMR staff provided job development support to 70 individuals, including career counseling, provider or business consultation, retraining, and job coaching. One person who speaks only Albanian is now working at a hospital that provides translation support and transportation on their local shuttle. A second person now works in her local neighborhood, is part of a carpool, and is jointly supported by the Boston Public Schools, DMR and the Massachusetts Rehabilitation Commission.

DMR at a Glance

as of June 30, 1998

| <i>Fiscal Year</i> | <i>1997</i> | <i>1998</i> |
|--|-------------|-------------|
| Total budget for department | 753.4M | 781.8M |
| Number of employees (FTE's) | 7,802 | 7,543 |
| Number of people served | 25,930 | 27,169 |
| Number of people in community residential programs | 6,763 | 7,110 |
| Number of people living in developmental centers | 1,602 | 1,445 |
| Number of people in supported employment programs | 2,949 | 4,730 |
| Number of families receiving family support | 16,268 | 17,805 |
| Number of providers contracting with the DMR | 320 | 310 |

Community Building

The South Coastal Board sponsored a workshop on accessing hidden resources. In Newton/South Norfolk provider agencies working with the DMR developed a public education campaign focusing on the recruitment of specialized home care providers.

More than 1000 people attended a variety of events throughout the Region, highlighting the integration of individuals into community life. The Middlesex West had their fourth annual celebration honoring 25 people who made a difference in the quality of people's lives. At Fernald's recognition night, more than 150 were in attendance honoring individuals with disabilities, volunteers, and employees.

Expanding Supports to People

During the past year, through the hard work of DMR staff, the provider community, family members, and the community at large, more than 500 people with mental retardation and their families received new or increased supports. In the Central Middlesex Area, through maximizing private, base and new resources, more than 120 people were able to access new services. New residential supports were developed in 17 communities in the Region. Thirty-five people transitioned into new homes in the community from facilities.

Responding to diversity and the desires and needs of people with disabilities and their families, as well as bridging to and involving the community, have fueled the initiatives and success of the year.

Commonwealth of Massachusetts

Performance Recognition Program

Each year, the Commonwealth of Massachusetts recognizes employees for outstanding job performance. This year, DMR staff who were honored are:

1998 MANUEL CARBALLO GOVERNOR'S AWARD FOR EXCELLENCE IN PUBLIC SERVICE

Performance Enhancement Commission

Bill Hetherington, Assistant Commissioner for Management and Finance, Brian Sullivan, Director of Core Services in Central, and Robert Guinto, Director of Purchase of Service, Metro Region, were part of a team that won for the Procurement Reform Work Group that was organized by the Executive Office for Administration and Finance.

PERFORMANCE RECOGNITION AWARD RECIPIENTS

Waiting List Planning Team

Roberta Lewonis, Senior Project Manager, Deb Grzywacz, Project Manager, and Renee Sousa, Administrative Secretary, Central Office

Individual Award Recipients

Jason Webb, EDP Systems Analyst, MIS, Central Office

Barbara Brownlee, Service Coordinator, Western Region

Cheryl Dunbar, Residential Supervisor, Western Region

Mariann DeBarbieri, Division Director, Templeton Developmental Center, Central Region

Patricia McCarthy, Director of Human Resources, Northeast Region

Lois Aldrich, Program Coordinator III - Clinical Director, Northeast Region

Susan McKay, Registered Nurse II, Southeast Region

Philip Tully, New Bedford Area Director, Southeast Region

Leslie Rubin, Habilitation Coordinator, Dever Developmental Center, Southeast Region

Jack Yates, Director of Training, Southeast Region

Mary Pittella, Administrative Assistant, Fernald Developmental Center, Metro Region

Colleen Mulligan, Service Coordinator Supervisor, Metro Region

Mary Ann Killilea, MRWIV, Fernald Developmental Center, Metro Region

Lincoln Road Home staff, Northeast Region

Paul Rivers, Sharon Baert, Keith Rando, Monica Ditroia, Robin Connors, Stephen Rollins, Frantz Romain, Paul Driscoll, Michael Giller, Yodeline Pinchinat, Joseph Raymond, Christopher Re, Faith Russo, Patricia Ryan, Sheilah Wells

Monson Developmental Center, Central Region

Henrietta Dixon, Julie Giza, Yvonne Walch, Dana Babiec, Rose Hajduk, Gail Herbst, Rose Martin, Robert Renaud, Vera Daniels, Ann Marie Proulx, Yvonne Corish, Elissa Pobieglo, MRW Staff

How to contact the Department of Mental Retardation

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Tel. (617) 727-5608 or visit our website at: www.dmr.state.ma.us

West Regional Office

1537 Main Street
Springfield, MA 01103
(413) 731-7742

Franklin/Hampshire

One Roundhouse Plaza
Northampton, MA 01060
(413) 586-4948

Berkshire

333 East Street
Pittsfield, MA 01201
(413) 447-7381

Holyoke/Chicopee

100 Front Street
Holyoke, MA 01040
(413) 535-1022

Springfield

436 Dwight St. Suite 205
Springfield, MA 01103
(413) 784-1339

Westfield

125 N. Elm Street
Westfield, MA 01085
(413) 562-1599

Central Regional Office

Glavin Regional Center
214 Lake Street
Shrewsbury, MA 01545
(508) 845-9111

South Valley – Milford

194 West Street #9
Milford, MA 01757
(508) 792-7749

South Valley

309 Main Street
Southbridge, MA 01550
(508) 792-7756

North Central

285 Central Street
Leominster, MA 01435
(508) 792-7490

Worcester

40 Southbridge Street
Worcester, MA 01608
(508) 792-7545

Northeast Regional Office

Hogan Regional Center
Hathorne, MA 01937
(978) 774-5000

Lowell

325 Chelmsford Street
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(978) 970-0223

Merrimack Valley

18 Essex Street
Haverhill, MA 01832
(978) 521-9432

Metro North

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Wakefield, MA 01880
(781) 224-0207

North Shore

The Atrium – 2nd Floor
Danvers, MA 01923
(978) 762-8368

Southeast Regional Office

68 North Main Street
Carver, MA 02330
(508) 866-5000

Taunton/Attleboro

21 Spring Street
Taunton, MA 02780
(508) 824-0614

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500 Belmont Street
Brockton, MA 02401
(508) 427-5731

Cape Cod/Islands

270 Communication Way
Hyannis, MA 02601
(508) 771-2595

Fall River

305 Pleasant Street
Fall River, MA 02720
(508) 730-1209

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908 Purchase Street
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68 North Main Street
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Metro Regional Office

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West Boston/ Brookline

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(781) 646-5500

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Somerville, MA 02144
(617) 623-5950

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85 East Newton Street
Boston, MA 02118
(617) 266-8800, ext. 417

Harbor

66 Canal Street
Boston, MA 02114
(617) 624-0430

Middlesex/West

114 Turnpike Road
Westboro, MA 01581
(508) 792-7890

Newton/South Norfolk

125 West Street
Walpole, MA 02081
(508) 668-3679

South Coastal

1221 Main Street
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(508) 824-5881

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**Irving A. Glavin
Regional Center**
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Hogan Regional Center
Hathorne, MA
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**Monson
Developmental Center**
Monson, MA
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**Templeton
Developmental Center**
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**Wrentham
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1998 DMR Annual Report

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Mission Statement

The Department of Mental Retardation is composed of people dedicated to creating, in cooperation with others, innovative and genuine opportunities for individuals with mental retardation to participate fully and meaningfully in, and contribute to, their communities as valued members.

Guiding Principles

The Department of Mental Retardation shall conduct itself according to the following guiding principles:

- promote the right of people with mental retardation to exercise choice and to make meaningful decisions in their lives;
- respect the dignity of each individual through vigorous promotion of the human and civil rights which, in part, strives to keep people free from abuse or neglect;
- ensure that adequate services and flexible resources are non-intrusive, cost effective and provided by qualified, trained personnel to meet individual needs and preferences;
- empower individuals and their families to speak out for themselves and others, initiate ideas, have choices and make decisions about needed supports;
- recognize that ethnic and cultural diversity of each individual must be valued and respected;
- enhance public awareness of the valuable roles persons with mental retardation assume in society through promotion of physical and social integration;
- support the dignity of achievement that results from risk-taking and making informed choices;
- recognize that realizing one's potential takes courage, skills, and supports;
- provide entry to services through a single, local and familiar community setting;
- operate according to accepted management practices;
- recognize that services providing meaningful benefits to individuals require a commitment to ongoing monitoring and evolutionary change.



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